

<p style="text-align: center;"><b>KENTUCKY CORRECTIONS</b> Policies and Procedures</p>	<p>Policy Number</p> <p style="text-align: center;">13.8</p> <p>Date Issued</p> <p style="text-align: center;">December 11, 1998</p>	<p>Total Pages</p> <p style="text-align: center;">13</p> <p>Effective Date</p> <p style="text-align: center;">December 17, 1998</p>
<p>References</p> <p>KRS 196.035, 197.020, 202A.400; ACA 3-4371, 3-4377, 3-4384; and 3-4388</p>	<p>Subject</p> <p style="text-align: center;"><b>SUBSTANCE ABUSE TREATMENT PROGRAM</b></p>	

## I. AUTHORITY

This policy and procedure shall be issued in accordance with the provisions of KRS 196.035 and 197.020 which authorize the Commissioner of the Department of Corrections (Corrections) to adopt, amend, or rescind rules and regulations necessary for the proper administration of Corrections.

## II. PURPOSE

To set forth guidelines concerning a comprehensive approach to substance abuse issues among offenders, as well as to specify guidelines for specialized substance abuse treatment programs.

To provide, within the limitations imposed by available resources, a variety of substance abuse treatment and intervention services to meet the varying needs of the inmate population within the constraints of the institutional and community correctional setting. To provide training in substance abuse issues to appropriate treatment and security staff when possible.

## III. APPLICABILITY

To all employees of Corrections and to all inmates and offenders under the jurisdiction of Corrections.

## IV. DEFINITIONS

"Adjunct Staff" means employees of Corrections who work in conjunction with the Substance Abuse Program.

"AODA Programs" means Alcohol and Other Drug Abuse Programs.

"Division" means the Division of Mental Health.

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"Offender Rehabilitation Specialist" means employees of Corrections so designated by personnel specifications.

"Substance" means any illegal substance whose purpose is to have a mood altering effect and a drug as defined in KRS Chapter 218A or alcohol as defined in KRS 241.010.

"Volunteer" means any person, at least 21 years of age, who provides a service to Corrections in conjunction with the Substance Abuse Program and staff, and does not receive a salary for performing this service. Volunteers may include practicum students and interns.

## V. POLICY

### A. Program Description: Intensive Residential Substance Abuse Treatment (IRSAT) Program

1. A core intensive treatment program shall consist of a six (6) month residential treatment program maintained at facilities designated by Corrections. The primary intensive Substance abuse treatment shall be coordinated by the Office of AODA Programs within the Division of Mental Health.
2. Program Components
  - a. The Program shall utilize nationally identified models for the population in this particular therapeutic setting. These models shall be continuously reviewed for treatment purposes and revised accordingly.
  - b. Components may include:
    - (1) psycho-education about chemical dependency;
    - (2) application of a twelve (12) step model to managing chemical dependency;
    - (3) relapse prevention strategies;
    - (4) cognitive strategies to correct criminal thinking;
    - (5) aftercare programming for those who have completed the one-hundred eighty (180) day program;
    - (6) other appropriate care and components;
    - (7) substance abuse testing of an individual participating in the core intensive substance abuse program upon initial entry into the program as well as on a monthly basis. An inmate participating in the program may be tested for cause;

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- (8) the Department shall maintain a zero tolerance, drug and alcohol free environment within its core intensive treatment program. An inmate who receives a positive drug or alcohol test shall be immediately removed from the program. In addition to any disciplinary sanctions which may be applied to the inmate, a termination review shall be conducted by the program staff and the inmate shall be advised what he needs to do to be readmitted. While this shall vary for each individual based on his specific needs, the plan generally may call for a period of drug or alcohol free testing and involvement in lower level Substance abuse programming such as the pre-treatment drug and alcohol education classes. Consideration of re-application to the program shall be made based upon satisfactory completion of the requirements of the termination review, availability of resources, and demonstrated compliance on the part of the inmate.

c. Ancillary interventions

In addition to the specific components focused on drug and alcohol issues, group counseling, psychiatric treatment, individual counseling, and self-help programs, including the twelve (12) step program, may be made available to the inmate depending upon the resources and need at each institution. These additional mental health services shall be considered ancillary to primary drug and alcohol treatment and shall not be seen as a substitute for the intensive residential Substance abuse treatment programs.

B. Program Description: Institutional Pre-treatment Drug and Alcohol Educational Program

Time limited, pre-treatment drug and alcohol education programs shall be available at each institution and conducted in a psychoeducational format. These groups are designed to make the inmate ready for treatment. The inmate shall be provided the basic information about drug and alcohol dependency and abuse necessary to enter into a more intensive treatment program, if appropriate.

While designed as a broad-based intervention, this program may also be utilized as a treatment sanction for someone producing a positive urine, a refresher for an individual who completes treatment, but not granted parole, or as a minimal level of intervention at the recommendation of the Parole Board, institutional mental health staff, or other departmental staff.

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C. Program Description: Community AODA Programs

1. Community based substance abuse treatment and intervention programs for Corrections shall be coordinated by the Office of AODA Programs within the Division of Mental Health.
2. Programs available within each Probation and Parole District may vary depending upon available local treatment resources.
3. Program Components
  - a. Treatment opportunities may include a residential treatment program, once a week outpatient Substance abuse counseling, a day treatment program, an intensive outpatient program, outpatient program, and general aftercare and relapse prevention support groups.
  - b. In addition to contracted community based services monitored by the Substance Abuse ORS, the Substance Abuse ORS within each district may conduct pre-treatment drug and alcohol education groups and post-treatment relapse prevention and aftercare groups.
  - c. In addition to the specific components focused on drug and alcohol issues, ancillary programs including group counseling, psychiatric treatment, individual counseling, and self-help programs (example: 12 step programs) may be made available to an inmate depending upon resources and need at each institution. These additional services shall be considered secondary to primary drug and alcohol treatment and shall not be seen as a substitute for the Substance abuse treatment program.
  - d. A treatment provider holding a contract with Corrections shall be required to drug test an offender on a random basis and to report the results of positive urinalysis immediately to the Probation and Parole Office.

VI. PROCEDURES

A. Application: Intensive Residential Substance Abuse Treatment

Each inmate applicant shall complete an application to the Office of AODA Programs. A completed application shall be forwarded to the Program office by the following sources:

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1. Classification and Treatment Officer;
2. Institutional Psychologist;
3. Parole Board; or
4. A Court.

B. Application: Pre-treatment Drug and Alcohol Education Program

An inmate may access this program through his CTO.

C. Application: Community AODA Programs

An offender shall access these programs by receiving a referral from his Probation and Parole Officer to the Substance Abuse ORS for an assessment and treatment recommendation.

1. A community offender shall be referred if:
  - a. he produces a positive urinalysis;
  - b. he has a documented substance abuse history;
  - c. he is returning to the community from an institutional intensive residential substance abuse treatment program.

D. Admissions: IRSAT

An inmate with a Substance abuse problem shall be treated as close as possible to his expected release to a community setting, maximizing any information and skills gained in the treatment process.

IRSAT Program staff shall be responsible for reviewing the applicant's admission criteria which may include results of screening measures of drug and alcohol abuse and dependency, criminal history, time served to date, parole status, and suitability for intensive residential treatment.

The program shall screen out an applicant with other psychological problems which may render current treatment efforts ineffective. An applicant shall meet minimum eligibility requirements to gain admission to the program, which may include:

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1. A willingness to acknowledge a problem with alcohol or drugs or a combination of the two and participate;
2. The applicant being within six (6) months to one (1) year of release either by parole or conditional release date;
3. The applicant shall not have any felony detainers or pending criminal charges;
4. The applicant shall not receive any:
  - a. Substance abuse disciplinary report conviction within the last three (3) months prior to application, and
  - b. A conviction on a major category disciplinary violation within the past three (3) months prior to application. An applicant who is accepted but not yet transferred to the program shall be rejected for a disciplinary conviction.
5. The applicant shall not be actively psychotic;
6. The applicant shall be likely to benefit from this form of treatment, this determination being made by a qualified mental health professional certified, in accordance with KRS 319.005;
7. Selection for admission in the IRSAT Program shall be made by staff conducting the program and may also include clinical interviews, review of collateral information and other more formal assessment strategies in order to make a determination of an applicant's appropriateness for treatment. Priority placement shall be given to an applicant referred by the Parole Board;
8. The clinical data which may be considered include:
  - a. results of screening and assessment measures;
  - b. criminal history;
  - c. time served to date;
  - d. history of prior interventions;
  - e. types of substances used;
  - f. parole eligibility date.

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9. Ultimate discretion for admission into the Substance Abuse Program shall remain with the program director;
10. If an applicant's next scheduled hearing before the Parole Board is greater than two (2) weeks away from the anticipated date of completion of the program, the applicant shall be given the option of signing a waiver agreeing to see the Parole Board thirty (30) days after completion of the program;
11. The applicant shall be notified by memorandum whether or not he has been admitted into the program.

E. Admissions: Pre-treatment Drug and Alcohol Education Program

The institutional staff person charged with the responsibility of conducting and delivering this treatment may schedule the participation of an inmate applicant according to space, availability of service, source of referral, and parole eligibility date.

F. Admissions: Community AODA Programs

An inmate with a Substance abuse problem shall be matched to the appropriate level of care upon return to the community or upon his entry into probationary status. He shall receive the full resources appropriate for his needs.

1. The ORS responsible for coordinating Substance abuse services may conduct an in-depth drug and alcohol psychosocial assessment and administer a variety of assessment instruments. The data obtained from these assessment activities shall be reviewed and a recommendation for the appropriate level of care shall be made to the supervising Probation and Parole Officer.
2. The ORS shall facilitate a referral to the appropriate community based treatment organization responsible for providing that level of services to an offender.
3. An offender receiving parole and returning to a community setting shall have a high priority for being placed in intensive Substance abuse treatment services.
4. In general, a community based client shall be matched to the appropriate level of treatment and shall complete all subsequent levels of care as he moves toward participation in the least intensive level of intervention, a monthly relapse prevention and aftercare group.

G. Attendance: IRSAT

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1. A participant may be terminated from the program if he fails to attend three (3) scheduled sessions unless the absence is "authorized." Authorized absences shall include:
  - a. Verified court appearances;
  - b. Verified medical appointment;
  - c. Verified sick call;
  - d. Verified classification;
  - e. Verified adjustment committee;
  - f. Attorney visits;
  - g. Other visits only if prior approval has been given by participant's primary counselor;
  - h. Other absences authorized by the participant's primary counselor.
2. Any absence shall be documented and included in progress reports.

H. Attendance: Pre-treatment Drug and Alcohol Education Program

1. The attendance policy applies for this program.
2. The institutional staff member charged with conducting this program shall keep appropriate records of attendance and may require an offender to make up a missed but excused education session.

I. Attendance: Community AODA Programs

1. An Offender shall be required to abide by the attendance policies set forth by the community treatment provider contracted to provide the community based substance abuse treatment.
2. A treatment vendor shall immediately report an unexcused absence to the designated staff person within the Probation and Parole Office.

J. Participant Evaluation: IRSAT

Each participant shall be evaluated by staff of the Substance Abuse Program on the following criteria:

1. Attendance;



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2. Participation;
3. Attentiveness;
4. Behavior;
5. Knowledge.

Each participant shall be given verbal feedback of his progress in the program and have aftercare recommendations discussed with him.

K. Participant Evaluation: Pre-treatment Drug and Alcohol Education Program

The format of this program is primarily instructive in nature. Participant evaluation shall focus on timely attendance, completion of any required assignment, and satisfactory completion of any designated pre and post-test.

L. Participant Evaluation: Community AODA Programs

The treatment provider shall provide the designated staff person within the Probation and Parole Office with a timely summary of an offender's participation. It may use a format agreed upon by the SAORS, supervising officer, and its organization.

M. Confidentiality: All Programs

Consistent with practices within the professional mental health community, information obtained in the course of an inmate's treatment shall be considered confidential. Exceptions include:

1. Program staff may release information pursuant to KRS 202A.400 if there appears to be a danger to the health and safety of inmates, staff or other persons or a threat to the security of the institution;
2. Program staff may release information to prison, probation and parole officials regarding the fact that an inmate had a Substance abuse problem in the past;
3. Program staff may communicate information to community treatment agencies for the purpose of planning aftercare.

N. Discharge and Termination Criteria: IRSAT

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A participant of the Substance Abuse Program may be administratively discharged or terminated from the program based on the following:

1. Successful completion of all program requirements;
2. Failure to comply with program requirements;
3. Failure to comply with program, institutional and dormitory rules which result in the issuance of a disciplinary report;
4. Placement in disciplinary or administrative segregation so that the participant is unable to attend the program;
5. Voluntary withdrawal from the program;
6. Medical reasons that preclude participation in the program;
7. Violation of attendance policy;
8. Failure to complete any other component of the treatment plan as designated by the Offender Rehabilitation Specialist or other assigned program staff.
9. Testing positive for drugs may result in immediate termination from the program.

O. Discharge and Termination from the Pre-treatment Drug and Alcohol Education Program

An individual may be discharged for failure to comply with the attendance policy set by the program, for disruptive behavior, or other issues which significantly interfere with attendance and participation.

P. Discharge and Termination from Community AODA Programs

Discharge and termination from this program shall be made after a meeting between the SAORS, the treatment provider and the Officer supervising the case. Participants of the Community AODA Program may be discharged or terminated from the program based on the following:

1. Successful completion of all program requirements
2. Failure to comply with program requirements

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3. Voluntary withdrawal from the program
4. Medical reasons that preclude participation
5. Termination by the treatment provider for rule violation
6. Failure to complete any other component of the treatment plan as designated by the SAORS, Probation and Parole Office, or other assigned program staff.

Q. Appeals of Termination from the IRSAT Program

1. The program participant may appeal termination from the Substance Abuse Program by submitting a written appeal to the licensed Psychologist or Program Administrator of the program for the Department, or his designee, within seven (7) days from written receipt of the termination. The licensed Psychologist or Program administrator or his designee shall forward a written response to the program participant within twenty-one (21) days of receipt of the appeal. That person's decision is final.
2. If a program participant is terminated from the Substance Abuse Program he may reapply ninety (90) days after the final termination date. Reapplication shall not guarantee readmission to the program.

R. Staffing: IRSAT

Administrative and program staff shall be determined by the Division of Mental Health. Security staff shall be provided by the institution housing the program.

1. The licensed Psychologist or Program Administrator shall oversee the residential and community Substance Abuse Programs and provide clinical supervision for those programs.
2. The certified Psychological Associate or Clinical Director shall provide the day-to-day administrative supervision for the residential Substance Abuse Program.
3. The Offender Rehabilitation Specialist attached to the program shall conduct daily programming and perform other duties as described in personnel specifications.
4. Security staff shall abide by the security procedures of the institution housing the program.

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S. Miscellaneous

1. Record Keeping

Treatment files shall be maintained separately from institutional files. The treatment files may include:

- a. application form;
- b. notification of acceptance or rejection;
- c. program agreement or contract;
- d. progress notes;
- e. raw psychological data and psychological reports;
- f. releases of information;
- g. discharge summaries or termination forms;
- h. individual course work;
- i. individual treatment plan;
- j. individual aftercare recommendations; and
- k. other relevant materials.

Discharge summaries or termination forms and individual aftercare recommendation shall be placed in institutional and Central Office files.

2. Upon successful completion of the program, the participant shall be given a certificate of completion. The original shall be given to the participant and copies shall be retained in the participant's treatment file, institutional file and Central Office file.
3. Discharge summaries shall be completed and submitted to the Parole Board. Copies shall be retained in the participant's treatment file, institutional file and Central Office file. Additional copies may be sent to appropriate sources requesting the information.